PTO/SB/22 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
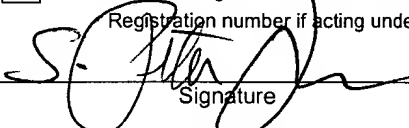U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	Docket Number (Optional) 06670/100J190-US1	
Application Number	09/845,814-Conf. #2311	Filed	April 30, 2001

For A SYSTEM AND METHOD FOR ANONYMOUSLY MATCHING PRODUCTS OR SERVICES WITH A CONSUMER

Art Unit	3624	Examiner	T. T. Havan

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

		Fee	Small Entity Fee	
[ ]	One month (37 CFR 1.17(a)(1))	$120	$60	$ _____
[ ]	Two months (37 CFR 1.17(a)(2))	$450	$225	$ _____
[X]	Three months (37 CFR 1.17(a)(3))	$1020	$510	$ 510.00
[ ]	Four months (37 CFR 1.17(a)(4))	$1590	$795	$ _____
[ ]	Five months (37 CFR 1.17(a)(5))	$2160	$1080	$ _____

[X] Applicant claims small entity status. See 37 CFR 1.27.

[X] A check in the amount of the fee is enclosed.

[ ] Payment by credit card. Form PTO-2038 is attached.

[ ] The Director has already been authorized to charge fees in this application to a Deposit Account.

[X] The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____ 04-0100 _____ . I have enclosed a duplicate copy of this sheet.

I am the
[ ] applicant/inventor.

[ ] assignee of record of the entire interest. See 37 CFR 3.71.
    Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

[X] attorney or agent of record. Registration Number _____ 25,351 _____

[ ] attorney or agent under 37 CFR 1.34.
    Registration number if acting under 37 CFR 1.34 _____ .

_____Signature_____	December 29, 2006
S. Peter Ludwig	Date
Typed or printed name	(212) 527-7770
	Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

[ ] Total of _____ 1 _____ forms are submitted.